

PART B - FEE(S) TRANSMITTAL

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7590 08/12/2002

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Elsa Keller
SIEMENS CORPORATION
Intellectual Property Department
186 Wood Avenue South
Iselin, NJ 08830

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Dian Stiver	(Depositor's name)
<i>Dian Stiver</i>	(Signature)
July 8, 2010	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/657,635	09/06/2000	Ismayil M. Guracar	2000P82261 US	1723

TITLE OF INVENTION: CONTRAST IMAGING BEAM SEQUENCES FOR MEDICAL DIAGNOSTIC ULTRASOUND

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1280	\$0	\$1280	11/12/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
JAWORSKI, FRANCIS J	3737	600-458000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

Siemens Medical Solutions USA, Inc. Malvern, PA

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government
4a. The following fee(s) are enclosed: Payment of Fee(s):

Issue Fee
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Jenny Ko
(Authorized Signature)

7/8/10
(Date)

Reg. No. 44,190

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